

## FRANK BROWN BERRY, 1892 - 1976

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**F**RANK Brown Berry died in Providence, R. I., on October 14, 1976. He was 84 years old and had been ill for a long time. Born in Dorchester, Mass., he attended the Roxbury Latin School and graduated from Harvard College in 1914. He received the degree of Doctor of Medicine from Harvard Medical School in 1917. During World War I he served as an army pathologist with the American Expeditionary Forces in France. He interned at the Peter Bent Brigham Hospital and at Boston City Hospital, where he did a residency in pathology. Following military service in World War I, he did an internship in surgery at Presbyterian Hospital in New York City, followed by a surgical residency on the First (Columbia) Division at Bellevue Hospital, where he later became the director of surgery. He was a diplomate of the American Board of Surgery and of the American Board of Thoracic Surgery. He was a member of the American, Southern, and PanPacific Surgical Associations, the James IV Society, the Halsted Society, the American Association for Thoracic Surgery, the American College of Surgeons, and the Society of Medical Consultants to the Armed Forces. He was professor of clinical surgery at Columbia University College of Physicians and Surgeons from 1946 through 1954 and thereafter professor emeritus. He trained under Dr. Adrian Lambert of New York and together they were pioneers in developing the specialty of thoracic surgery. During World War II Dr. Berry was chief of surgery of the Ninth Evacuation Hospital, a reserve unit from the Roosevelt Hospital in New York City, and one of the earliest outfits ashore during the North African landings. Following the armistice in Europe, he was appointed deputy chief for public health and welfare of the Allied Commission in Europe, with the specific task of reopening German medical schools. His military awards included the Legion of Merit, six campaign stars, the French Croix de Guerre, and Chevalier of the French

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U.S. Army Photograph

DR. FRANK BROWN BERRY

Legion of Honor. Dr. Berry was a lover of rare books and a bibliophile in the tradition of Osler and Cushing. He collected many rare and unusual books and often gave prized volumes to his friends. He helped to translate Theodoric's *Surgery* from the Latin, and participated in having certain volumes published.

After World War II, as a Medical Corps Reserve Officer, he was promoted to brigadier general. He was appointed Secretary of Defense for Health and Welfare by President Dwight Eisenhower and was the author of the Berry Plan, whereby young medical graduates could defer active military service until they completed residency training in their chosen specialty. More than 42,000 physicians and surgeons took advantage of the Berry Plan. He is survived by his wife, Lois Bliss Berry of Providence, and a brother, John K. Berry of Arlington, Mass.

Dr. Berry will be sorely missed by his friends and colleagues in the United States and in many countries of Europe and Central and South America.

These facts tell the reader that this was an honored and distinguished surgeon, but what sort of man was he really?

I applied to Bellevue's First Surgical Division in 1948 and, along with some 200 other applicants, took the day-long examination then in vogue. We were trying for eight internship positions—actually only seven because every year Dr. Berry always took one Harvard man. There was no matching program in those days and as Walter Ballinger and I left Bellevue, Dr. Berry came down the steps behind us and invited us to have dinner with him. We accepted instantly and were instructed to meet him at the Century Club at 6 P.M. We did not know where that was but my aunt, a surgeon, did and we arrived promptly. After cocktails and a superb dinner with two wines, we sat over coffee and cognac and Dr. Berry offered both of us internships. Again we accepted at once and slept all the way home to Philadelphia. It was not a very democratic process but it worked. Dr. Berry was director of both the First Surgical Division and the Chest Surgical Service at Bellevue. He devoted enormous amounts of time and energy in training each one of us and took a personal interest in our lives and, indeed, in all of our individual affairs. This interest continued throughout his life and he somehow managed to keep track of our progress. One could look forward to a phone call or brief note to celebrate marriage, birth of a child, promotion, publication of an article, whatever. His office door was always open and, in fact, his secretary had a separate

office across the hall. His early morning arrival at Bellevue included first a stop in the record room and then at the blood bank. As a result of his attention to these matters, we usually had a credit in the blood bank and none of us got very far behind in the record room. I developed the habit of going to the record room every Thursday morning, which I still do to this very day. Dr. Berry was adamant that house officers be on time and I can recall with sorrow the one time I was late. As a chief resident I had been up all night with some emergency or other and after a gulped breakfast and a quick shower arrived in the operating room at 12 minutes before eight. We were expected to be there gloved, gowned, and ready to go at 7:45 A.M. Dr. Berry said simply, "You won't be needed here this morning." As in the army, the only acceptable excuse was the military "No excuse, sir." The operation was to have been a thyroidectomy, rare in city hospitals at the time. I was heartbroken but I had broken the rules, chief surgical resident notwithstanding. Profanity of even the mildest sort resulted in prompt dismissal from the operating room. Dr. Berry said that if you swore you were angry at yourself and that was not a fit mood in which to operate upon anybody.

He was perfectly happy to assist a new intern with his first simple operation or to work with a senior resident on the most complicated problem. He had that rare ability to penetrate to the heart of the most complex clinical problem with uncanny skill in diagnosis. He expected and received neat, concise case presentations including only the pertinent facts. Visiting surgeons (now called attending surgeons), who received not one cent for their efforts in those days, made rounds and helped us in the operating room and appeared en masse for Saturday morning grand rounds. On these occasions Dr. Berry examined every surgical incision and saw each patient on the service. Most Saturdays there would be surgeons from other parts of the country and visitors from foreign countries in addition to our entire staff. It would have been unthinkable for any attending surgeon to be absent for any reason, least of all a golf game.

Dr. Berry never criticised us in public but one could be assured of a stern but completely fair reprimand, when deserved, in his office.

Yearly appointments were based on merit alone. I well remember two individuals who simply were never meant to be surgeons. Dr. Berry gently but firmly took them in hand. Both of these physicians, whom I have seen in recent years, are still grateful for his wisdom and insight and are perfectly happy in their present fields of radiology and pathology.

Dr. Berry had a life-long interest in good food and fine wine. When he left Bellevue to go to Washington as Secretary of Defense for Health and Welfare, we residents arranged a goodbye party at the Century Association. There, Mario, the maitre de hotel, presented an enormous menu. At each suggestion Mario would say, "But Dr. Berry doesn't like that." Finally, in desperation, we said, "Mario, please order dinner and all the appropriate wines." After dinner, when Dr. Berry rose to thank us, he wondered aloud how we ever managed to order all of his favorite things. Mario stood quietly in the corner and said nothing. We also wanted a special gift. After a lifetime of presents from grateful patients, it was difficult indeed to come up with something Dr. Berry would like but did not own. At last we settled on a tantulus with three crystal decanters from a silver shop on Madison Avenue. Our pooled resources came to \$189 and the tantulus was \$200. As we stood there in our hospital whites wondering how to resolve this dilemma, the owner asked about the occasion. When we told him, he said, "Well, I think \$189 is just about right. Now, what would you like to have engraved on it?" Imagine that happening today!

Dr. Berry had appointments at almost every major teaching hospital in New York City. He might have been called a surgeon's surgeon. When an outstanding surgeon would find a terribly complicated thoracic surgical case beyond his capabilities he would appeal to Dr. Berry and they would then do the operation together. On one such occasion I was a resident at Babies Hospital. Dr. Berry came to the floor to examine the patient, whose intrathoracic sarcoma had been thought to be unresectable. Dr. Berry arrived in his street clothes and the head nurse said, "I'm sorry sir, I don't believe I know you." I was mortified. Quite unruffled, Dr. Berry said, "You're perfectly right nurse. I am Dr. Frank Berry and I apologize for coming up here without my white coat." Once again I had learned a simple lesson. The child was successfully operated upon the following day.

When the Korean War started, Dr. Berry called us into his office and suggested that we volunteer. Four of us, myself included, went to Washington the following morning. Each of us ended up with an assignment as a surgeon in a Mobile Army Surgical Hospital (MASH), which was the absolute choice spot for a young surgeon in training. Dr. Berry absolutely refused to admit that he had anything whatsoever to do with our assignments. Perhaps he did not, but he was a brigadier general in the army and one cannot but wonder when every single member of the First Surgical Division got a

choice assignment. He visited Korea as a consultant to the Surgeon General's office. We had asked the army repeatedly for surgical textbooks and journals without success. Three weeks after he left, a trunkful arrived.

I well remember taking him on rounds. Six badly wounded soldiers who had undergone extensive and complicated operations were doing very well. I was quite proud of these accomplishments but Dr. Berry was not impressed. He spent most of his time with a fat army sergeant whose appendix had ruptured by the time he had reached our hospital. That was a loss of man hours and an example of error in diagnosis up the line before the sergeant got back to us. Once again, he was always concerned with fundamentals. He fully expected us to handle war wounds properly. After all, gunshot wounds were nightly fare at Bellevue and artillery shell fragments are just larger and do more damage. I managed to accompany him on part of his tour in Korea. The first place we visited was a Norwegian MASH unit. Before going inside, Dr. Berry asked me if I was acquainted with aquavit. He explained it was served ice cold, in very small glasses, to eat plenty of hors d'oeuvres and to go very slowly. I followed his advice carefully, but after three tiny glasses went off and found an empty cot for a nap. When I woke up two hours later Dr. Berry, having completed his inspection of the hospital, was happily drinking toasts of aquavit.

Following my discharge from the army, I returned to Bellevue to complete my surgical residency. Dr. Berry had skillfully managed things so that each of us who had completed military service had his job ready and waiting. In training I met many men whose directors had made no effort at all to fit them back into their programs.

During grand rounds one morning, we presented a policeman who had been shot in the thigh with a 45 caliber bullet. We had debrided this wound and laid the thigh wide open. One of the older attending surgeons started to berate me for this rather drastic surgical threatment. Dr. Berry looked at the senior surgeon and said "... these boys know more about the correct treatment of gunshot wounds than you ever will." Though pleased, I was greatly embarrassed for the older surgeon.

If all of this seems an affectionate memory, it is meant to be. He was closer to most of us than our own relatives. He was a superb surgeon, a brilliant teacher, and a true friend. I fully appreciate his many outstanding accomplishments in the military, in the American College of Surgeons, and with the New York Academy of Medicine. But for those of us whom he

trained as surgeons he was quite simply our beloved chief.

Frank Berry's funeral took place in St. Bartholomew's Church in New York City on October 18, 1976. He loved his church and served it as vestryman for many years. That would have been a very bad Monday to need a surgeon in New York City—the church was literally full of them, and they came from Bellevue Hospital, Roosevelt Hospital, St. Luke's Hospital, Presbyterian Hospital, and innumerable other hospitals in and around New York City. I looked across the pew I was in and noted that it contained every single one of my intern group. We would no more have considered missing the chief's funeral than we would have considered missing his ward rounds. After the service several of us repaired to the Century Association for lunch and a bottle of wine. Dr. Berry would have approved.